

Little Traverse Bay Bands of Odawa Indians

7500 Odawa Circle Harbor Springs, MI 49740

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Job Posting

Job Title: BILLING SPECIALIST
Department: Accounting
Reports To: Controller
Status: Exempt
Salary Range: \$15.13 to \$20.47 per hour/ (\$31,475 - \$42,584) annual
Level: 4
Open: October 7, 2011
Close: October 28, 2011

SUMMARY

Compiles and completes medical billing process for the LTBB Health Department. Processes Tribal Health Department professional service charges. Keeps billing procedures updated, diagnosis and CPT codes in computer records accurate. Responsible for verification and completeness of EHR (Electronic Health Records) being processed for third party billing.

ESSENTIAL DUTIES and RESPONSIBILITIES include the following. Other duties may be assigned.

- Maintain IHS RPMS Coding Audit Program by reviewing, auditing and making corrections to Health Department patients' visits, including but not limited to Medical Clinic & Community Health, with respect to proper coding of CPT, HCPCS and ICD codes and completeness of patient visit.
- Provide periodic reporting of incomplete patient visits as required.
- Bill Medical charges to Medicare and Medicaid under Federally Qualified Health Center regulations and Tribal 638 program regulations.
- Prepare and submit Quarterly Credit Balance reports for Medicare and gather information for Annual Cost Report.
- Respond to any requests from the State of Michigan with regard to Medicaid Annual Cost Report.
- Review, audit and make corrections to Dental Clinic patients' visits, with respect to proper coding of CDT services.
- Enter charge and payment information into both Medical and Dental billing systems.
- Maintain Medical Billing system, including but not limited to monitoring Accounts Receivable, monthly maintenance, and upgrades as needed.
- Monitor all reimbursements and update all fee schedules as appropriate.

- Responsible for contacting third party-payer sources for follow-up and disposition of accounts.
- Bill secondary insurance as needed.
- Maintain ICD, HCPCS, CPT and CDT codes in Medical and Dental electronic records and billing systems, and inform healthcare staff of appropriate code usage.
- Keep up-to-date and knowledgeable of all coding procedures. Stay current on federal and state legislative changes relating to billing Medicare and Medicaid.
- Maintain practice and provider enrollment files, and enroll new providers with all insurance carriers as necessary.
- Answer all incoming correspondence and phone calls concerning billing of accounts, and assist patients face-to-face with any insurance or billing concerns as needed.

QUALIFICATIONS

Candidate must have expertise in medical terminology, billing, coding and medical practice operating procedures; skills in use of computer and electronic health records system. Ability to examine visit documentation for accuracy and completeness is essential. Ability to complete tasks with little supervision. Must be able to pass a proficiency test.

Certified Professional Coder Certification required.

EDUCATION and EXPERIENCE

Associates Degree and two years of work experience in medical coding practices, including one year experience with EHR.

OR

High School Diploma/GED plus three years of work experience in medical coding practices, including one year of experience with EHR.

COMMENTS

Must possess valid driver's license, be insurable, and have reliable transportation at all times. Individual must be able to pass a background investigation. Indian preference will apply.